Comments and questions regarding this section may be directed to the person listed below:

Shawn Nelson, Industrial Safety Specialist G40 TASF 294-2153

NOTE: This Section's Sign-Off Record is maintained in the ESH&A Office, G40 TASF.

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REVISION / REVIEW LOG

SECTION 10 – ASSESSMENT PROGRAM

Review Number:	Effective <u>Date</u> :	Contact Person:	Pages <u>Affected</u> :	Description of <u>Revision</u> :
0	10/11/99	Tom Wessels	All	Original Issue
1	1/13/06	Shawn Nelson	See Revision Description	G:\Doc&Recs\DCP\Revision Description\Manual 10200.002 Section 10 Revision 1.doc

SIGN-OFF RECORD

The Environment, Safety Health and Assurance Program Manual has been reviewed and approved as documented below:

Reviewed by:		Date:	
220 720 11 0 11	Environment, Safety, Health & Assurance		
Approved by:	Division Director, Chief Operations Officer	Date:	
Approved by:	Division Director, Science and Technology	Date:	
Approved by:	Deputy Director	Date:	
Approved by:	Discotos	Date:	

 $Note: \ Original \ Sign-off \ Record \ with \ signatures \ is \ on \ file \ with \ ESH\&A.$

10.0 ASSESSMENT PROGRAM

10.1 WORKER OBSERVATIONS

Applicability Statement: This section applies to all employees.

This section also applies to ESH&A for tracking and resolution of

employee concerns and trending of deficiencies.

10.1.1 REFERENCES

DOE Policy 450.4, Safety Management System Policy Guide 10200.003, Worker Observation Guide Plan 10200.008, Employee Safety and Security Concerns Program Implementation Plan Procedure 10200.041, Trend Analysis of ES&H Concerns

10.1.2 BACKGROUND

The most important and effective process for identification and correction of process deficiencies is the observation of individual employees. Direct line supervisors provide individual work directions and each worker is accountable for performing quality work in a safe and productive manner. Employees are charged with the responsibility of continuously assessing their individual performances and their workspaces in order to prevent problems and to identify nonconforming conditions and opportunities for improvement. Ames Laboratory seeks to promptly address employee concerns about environment, safety and health issues in the workplace.

10.1.3 PROGRAM INFORMATION

Workers shall assess their work and work environments in order to identify potential hazards and opportunities for improvement. The Worker Observation Guide (Guide 10200.003) is available to assist workers in the observation of activities within office spaces and laboratory/shop spaces. Work deficiencies should be corrected as soon as possible by the workers involved with the activity. Workplace deficiencies should be reported to the first level of management as soon as possible. Resolution of concerns should occur at the level of line management most directly responsible for the activity. If the issue cannot be resolved at this level, the employee is directed to proceed within his/her line management structure or to report the concern to the Environment, Safety, Health and Assurance (ESH&A) office as part of the Employee Safety and Security Concerns Program.

10.1.4 TRAINING

GENERAL EMPLOYEE TRAINING (GET) FOR NEW EMPLOYEES #AL-001		
Intended Audience: Mandatory for all employees.		
Module Format:	Classroom Instruction. Estimated completion	
	time: 1.5 hours. This topic is discussed with	
<u></u>	new employees.	
Associated Retrain Period & Format:	Retrain is required if an employee has been	
	terminated from the Laboratory for more than	
	a one-year period. All Ames Laboratory	
	employees receive the Laboratory's Annual	
•	Retrain Mailing, which covers, Fire Safety,	
•	Cyber Security, Physical Security,	
	informational updates and policy reminders.	

10.1.5 PERFORMANCE CHECKLIST

Supervisors / Group Leader / Department Manager shall:

- □ Assure workers have training and competence commensurate with work responsibilities.
- Provide work instructions suitable for the work processes undertaken.
- □ Assist workers with mitigation of hazards.
- □ Report unresolved safety deficiencies to ESH&A.

Employees shall:

- □ Attend "General Employee Training", (AL-001).
- □ Assimilate work instructions into work practices.
- □ Identify and mitigate work hazards in work environments.
- Report unmitigated work hazards to Supervisor, Group Leader, or Department Manager.
- □ Report unresolved work hazards to ESH&A via the Safety and Security Concerns Program.
- □ Utilize "Stop Work Authority", to protect workers, the public and the environment. See Section 5.2 of this manual.

Environment, Safety, Health & Assurance (ESH&A) shall:

- □ Seek resolution of employee safety and security concerns.
- Conduct trend analysis of safety deficiencies.

10.2 MANAGER ASSESSMENTS

Applicability Statement: This section applies to Group/Section Leaders, Safety

Coordinators/Representatives, Program Directors and Department

Managers.

This section also applies to ESH&A for tracking and resolution of

Employee Concerns and trending of deficiencies.

10.2.1 REFERENCES

DOE Policy 450.4, Safety Management System Policy Form 10200.026, Walk-Through Report Plan 10200.008, Employee Safety and Security Concerns Program Implementation Plan Procedure 10200.014, Program/Department Walk-Through

10.2.2 BACKGROUND

While each individual is responsible for the quality and safety of her/his work, Supervisors and Group/Section Leaders are accountable for oversight, direction, and guidance of work activities. Program Directors/Department Managers assess the allocation of resources and the management of hazards associated with the activities of the Groups/Sections within their organizations. Group/Section Leaders and Program Directors/Department Managers, or their Safety Representatives/Coordinators should periodically review the work being conducted within their organization and correct any identified deficiencies.

10.2.3 PROGRAM INFORMATION

Group / Section Leader Observations

Group/Section Leaders should periodically review the work being conducted within their organization and correct any identified deficiencies. Safety Representatives should assist with this effort. Formal documentation of this effort is not required, but unresolved concerns shall be presented to the appropriate Program Director/Department Manager or ESH&A.

Program / Department Walk-Through

The Program Directors/Department Managers (with the Safety Coordinator) shall conduct a walk-through at a minimum frequency of once per year (Procedure 10200.014 Program/Department Walk-Throughs). Observations are assigned Quality Assurance (QA) Ratings primarily based upon consequence and risk potential.

QA – Low	QA – Moderate	QA – High
Condition probably would not affect	Condition could cause	Condition could cause
safety or health; would not affect the	minor injury or has	severe injury or illness or
environment or programmatic goals;	potential for minor	has potential for major
and does not violate a regulation or	environmental or	environmental or
Laboratory policy.	programmatic impact.	programmatic impact.

The Safety Coordinator shall document the identification and the closeout of concerns by utilizing the Walk-Through Report form (Form 10200.026) or other forms which:

- 1. documents the observation as a Concern or Noteworthy Practice
- 2. delineates the QA Rating of a Concern:
 - <u>High QA Rating</u> Close out by the end of the first full workday after the concerns are identified.
 - Moderate QA Rating Close out within 60 days of report date or develop a formal Ames Lab Action Plan for close out which must be approved.
 - Low QA Rating Close out as soon a possible, as resources are available.
- 3. notes the person or organization responsible for corrective action and the response
- 4. lists the date of closeout
- 5. indicates verification of closeout

It is the responsibility of the Program Director, Group /Section Leader or Department Manager to perform the actions necessary to closeout the concerns identified by the Program/Department Walk-Through according to the requirements for the QA rating assigned to the observation. Conditions observed during the Program/Department Walk Through which require attention such as facilities deficiencies (e.g., electrical wiring, lights, fume hoods, plumbing, etc.), should be communicated to the Facilities Services Group or Engineering Services Group appropriately. The Group/Section or Program/Department responsible for the corrective actions taken to closeout the concern shall document the response on the Walk-Through Record form (Form 10200.026) or other form. Verification of the closeout shall be performed by the appropriate Safety Coordinator and documented.

Walk-through records, once verified by the Safety Coordinator shall be kept by the Program/Department responsible for the walk-through in accordance with the requirements of the General Records Schedule or DOE Schedule.

10.2.4 TRAINING

HAZARD IDENTIFICATION	#AL-130
Intended Audience:	Mandatory for Safety Coordinators and
	Representatives.
	Suggested for all Group Leaders.
Module Format:	Classroom Instruction. Estimated completion
	time: 1.5 hours.
Associated Retrain Period & Format	: Five year retrain. Classroom instruction.

PROGRAM/DEPARTMENT WALK-THROUGH REPORTS #AL-0		
Intended Audience: Mandatory for Safety Coordinators.		
Module Format: Classroom Instruction. Estimated comple		
	time: 1.0 hour.	
Associated Retrain Period & Format:	Five year retrain. Classroom instruction.	

10.2.5 PERFORMANCE CHECKLIST

Group / Section Leaders shall:

- Periodically review the work being performed within their organization.
- □ Correct identified safety deficiencies.
- □ Report unresolved safety deficiencies to ESH&A.

Safety Representatives shall:

- Assist Group/Section Leaders with review of work being performed within their organization.
- □ Report unresolved safety deficiencies to ESH&A.

Safety Coordinators shall:

- Assist Programs and Departments with the performance of Program/Department Walk-Throughs.
- Document the identification and the close out of concerns identified through the Program/Department Walk-Through.
- □ Forward the Walk-Through findings (by percentage) to ESH&A at the end of the year (December 31) for Lab wide trend analysis. The findings should be categorized according to the 24 listings in Procedure 10200.014 Program Department Walk-Throughs.
- □ Report unresolved safety deficiencies to ESH&A.

Department Manager and Program Directors shall:

- Participate in the annual Program/Department Walk-Throughs with the Safety Coordinator.
- Assure that identified safety deficiencies are corrected.
- □ Report unresolved safety deficiencies to ESH&A.

Environment, Safety, Health & Assurance (ESH&A) shall:

- □ Seek resolution of employee concerns.
- Conduct trend analysis of safety deficiencies.

10.3 INDEPENDENT ASSESSMENTS

Applicability Statement: This section applies to all organizational units, Group/Section

Leaders, Safety Coordinators/Representatives, Program Directors and

Department Managers.

This section also applies to ESH&A.

10.3.1 REFERENCES

DOE Policy 450.4, Safety Management System Policy Procedure 10200.021, Independent Walk-Throughs Plan 10200.022, ESH&A Topical Appraisals

10.3.2 BACKGROUND

In addition to the observations by workers, Group/Section Leaders and Programs/Departments the Laboratory has regulatory and contractual requirements to conduct independent and topical reviews. These reviews are designed to provide objective assessments of conditions in the work place and the status of implementation of regulatory requirements.

10.3.3 PROGRAM INFORMATION

Independent Walk-Throughs

Independent Walk-Throughs shall be conducted under the direction of ESH&A according to Procedure 10200.021 Independent Walk Throughs. A walk-through shall be performed on each Program and Department on an annual basis. The Independent Walk-Through Team shall consist of representatives from upper management, ESH&A, and an electrical safety inspector. ESH&A will coordinate these walk-throughs and track corrective actions.

Observations are assigned Quality Assurance (QA) Ratings primarily based upon consequence and risk potential.

QA – Low	QA – Moderate	QA – High
Condition probably would not affect	Condition could cause	Condition could cause
safety or health; would not affect the	minor injury or has	severe injury or illness or
environment or programmatic goals;	potential for minor	has potential for major
and does not violate a regulation or	environmental or	environmental or
Laboratory policy.	programmatic impact.	programmatic impact.

It is the responsibility of the Program/Department to perform the actions necessary to closeout the concerns identified during the walk-through according to the requirements for the QA rating assigned to the observation. This includes writing Service Order Requests for Facilities Services Group, Engineering Services Group, ISU Facilities, etc. to perform maintenance/service. The following is the time schedule for closing out the QA discrepancies:

- <u>High QA Rating</u> Close out by the end of the first full workday after the concerns are identified.
- Moderate QA Rating Close out within 60 days of report date or develop a formal Ames

Lab Action Plan for close out which must be approved.

• Low QA Rating - Close out as soon a possible, as resources are available.

The appropriate walk-through team member will verify closeout of all High QA Concerns.

ESH&A Topical Appraisals

Environment, Safety, Health and Assurance (ESH&A) performs topical appraisals of Ames Laboratory organizations in order to assist the Programs/Departments to fulfill their safety responsibilities and to fulfill the Laboratory's requirements to perform independent assessments. ESH&A in agreement with the Ames Site Office utilizes a graded approach to determine applicability and frequency of specific topics of appraisals.

10.3.4 TRAINING

HAZARD IDENTIFICATION	#AL-130
Intended Audience:	Mandatory for Safety Coordinators and Representatives.
Module Format:	Suggested for all Group Leaders. Classroom Instruction. Estimated completion time: 1.5 hours.
Associated Retrain Period & Format:	Five year retrain. Classroom instruction.

10.3.5 PERFORMANCE CHECKLIST

Group / Section Leaders shall:

- Correct identified safety deficiencies.
- □ Report unresolved safety deficiencies to ESH&A.

Safety Representatives shall:

- □ Assist Group/Section Leaders with review of work being performed within their organization.
- □ Report unresolved safety deficiencies to ESH&A.

Safety Coordinators shall:

- Assist Programs and Departments with Independent Walk-Through preparation and close out of safety deficiencies.
- □ Report unresolved safety deficiencies to ESH&A.

Department Manager and Program Directors shall:

- Participate in Independent Walk-Throughs or provide a Program/Department representative.
- Assure that identified safety deficiencies are corrected.
- Report unresolved safety deficiencies to ESH&A.

Environment, Safety, Health & Assurance (ESH&A) shall:

- Conduct Independent Walk-Throughs.
- Conduct ESH&A Topical Appraisals.
- Conduct trend analysis of safety deficiencies.